
State of Washington

Behavioral Risk Factor Surveillance System Questionnaire 1992

Washington State Department of Health
Center for Health Statistics
and
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
Office of Adult and Community Health
Behavioral Surveillance Branch

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Washington State Department of Health
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1992 Behavioral Risk Factor Surveillance System Questionnaire

Table of Contents

Title	Page
Seatbelts	1
Bicycle Helmets	1
Hypertension Awareness	2
Exercise	2
Boating Safety	4
Health Care Use	5
Weight Control Practices	5
Tobacco Use (Smoking)	6
Smokeless Tobacco	7
Alcohol Consumption	8
Preventive Health Practices	9
Cholesterol Awareness	9
Diabetes	10
Injury Control and Child Safety	10
Health Care Insurance	10
Women's Health	11
HIV/AIDS	14
Demographics	17

ALL RESPONDENTS:

1. Enter respondent's sex

Male	1
Female	2

2. First, I'd like to begin by asking you about using seat belts. How often do you use seat belts when you drive a car or ride in a car; would you say ... READ 1-5:

- | | |
|---|-------|
| Always | 1 |
| Nearly always | 2 |
| Sometimes | 3 |
| Seldom | 4 |
| Or never | 5 |
| <hr style="border-top: 1px dashed black;"/> | |
| Don't know/Not sure | 6 (7) |
| Never drive/Ride in a car | 7 (8) |
| Refused | 8 (9) |

3. We were also interested in children's use of bicycle helmets. Are there any children between the ages of 5 and 18 living in the your household?

- | | | |
|--------------------|---------------------|---|
| ASK Q.4 ←----- | Yes | 1 |
| | No | 2 |
| SKIP TO Q.9 ←----- | Don't know/Not sure | 3 |
| | Refused | 4 |

4. What is the age of the youngest child in that age group?

Refused	99
---------	----

- 5/6. When riding a bicycle, how often does your youngest child wear a bicycle helmet; Would you say ... READ 1-5:

- | | |
|---|-------|
| All of the time | 1 |
| Most of the time | 2 |
| Sometimes | 3 |
| Rarely, or | 4 |
| Never | 5 |
| <hr style="border-top: 1px dashed black;"/> | |
| Does not have/ride bicycles | 6 |
| Don't know/not sure | 7 |
| Refused | 8 (9) |

7. Combines Q.5 and 6
8. Blank, computer use

9. These next questions are about hypertension or high blood pressure. About how long has it been since you last had your blood pressure taken by a doctor, nurse, or other health professional?

Within the past 6 months	1
Within the past year	2
Within the past 2 years	3
Within the past 5 years	4
Or more than 5 years ago	5

Don't know/Not sure	7
Never	8
Refused	9

10. Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure? PROBE FOR DOCTOR, NURSE, OR OTHER HEALTH PROFESSIONAL

SKIP TO Q.13 ←-----	No	1
	Yes by doctor	2
	Yes, by nurse	3
	Yes by other health professional	4
SKIP TO Q.13 ←-----	Don't know/Not sure	5 (7)
	Refused	6 (9)

11. Have you been told on more than occasion that your blood pressure was high, or have been told this only once?

More than once	1
Only once	2
Don't know/Not sure	3 (7)
Refused	4 (9)

12. Is any medicine currently prescribed for your high blood pressure?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

13. The next few questions are about exercise, recreation, or physically activities other than your regular job duties. During the past month, did you participate in any physical activities or exercise such as running, calisthenics, golf, gardening, or walking for exercise?

CONTINUE WITH Q.14←-----	Yes	1
	No	2
SKIP TO Q.25 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

14. What type of physical activity or exercise did you spend the most time doing during the past month?
CODE FROM LIST (see TECHDOC\CODELIST\PHYSACT.DOC)

Aerobics	1 (01)	Jogging	C (22)
Baseball/Softball	2 (41)	Rowing machine	D (56)
Basketball	3 (04)	Running	E (30)
Bicycle machine	4 (55)	Skiing, snow	F (39)
Bicycle outside	5 (05)	Skiing, water	G (52)
Calisthenics	6 (09)	Swimming	H (46)
Dancing	7 (12)	Walking	I (51)
Gardening, wood chopping, yardwork	8 (14)	Weight lifting	J (53)
Golf	9 (15)	Other (Specify)	K (54)
Hiking	A (18)	Refused	L (99)
Hunting	B (21)		

**IF REFUSED, SKIP TO Q.19. IF RUNNING, JOGGING, WALKING OR SWIMMING
ASK Q.15., ALL OTHERS SKIP TO Q. 16.**

15. How far do you usually (walk)/ (run)/ (jog)/(swim)? SHOW IN MILES AND TENTHS IF POSSIBLE, EXAMPLE - 1 AND 1/10 MILE = 011, 1 AND ½ MILE = 015. IF UNSURE, RECORD AS GIVEN.

Miles and tenths	_____
Don't know/Not sure	777
Refused	999

16. How many times per week or per month did you take part in this activity?

Don't know/Not Sure	_____	777
Refused		999

17.

Per week	1
Per month	2

18. And when you took part in this activity, for how many minutes or hours did you usually keep at it?
EXAMPLE: 1 HOUR 20 MINUTES = 120, 4 HOURS 45 MINUTES = 445, 6 HOURS 5 MINUTES = 605, 20 MINUTES = 020.

	_____ hrs.	_____ min.
Don't know/Not Sure		777
Refused		999

19. Was there another physical activity or exercise that you participated in during the last month?

ASK Q.20. ←-----	Yes	1
	No	2
SKIP TO Q.25 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

20. What other type of physical activity gave you the next most exercise?

CODE FROM LIST (see TECHDOC\CODELISTP\PHYSACT.DOC)

Aerobics	1	(01)	Jogging	C	(22)
Baseball/Softball	2	(41)	Rowing machine	D	(56)
Basketball	3	(04)	Running	E	(30)
Bicycle machine	4	(55)	Skiing, snow	F	(39)
Bicycle outside	5	(05)	Skiing, water	G	(52)
Calisthenics	6	(09)	Swimming	H	(46)
Dancing	7	(12)	Walking	I	(51)
Gardening, wood chopping, yardwork	8	(14)	Weight lifting	J	(53)
Golf	9	(15)	Other (Specify)	K	(54)
Hiking	A	(18)	Refused	L	(99)
Hunting	B	(21)			

**IF REFUSED, SKIP TO Q.25. IF RUNNING, JOGGING, WALKING, OR SWIMMING
ASK Q.21, ALL OTHERS SKIP TO Q. 22**

21. How far do you usually (walk)/ (run)/ (jog)/(swim)? SHOW IN MILES AND TENTHS IF POSSIBLE, EXAMPLE - 1 AND 1/10 MILE = 011, 1 AND ½ MILE = 015. IF UNSURE, RECORD AS GIVEN.

Miles and tenths	_____
Don't know/Not sure	777
Refused	999

22. How many times per week or per month did you take part in this activity?

Don't know/Not Sure	_____	777
Refused		999

23.	Per week	1
	Per month	2

24. And when you took part in this activity, for how many minutes or hours did you usually keep at it?
EXAMPLE: 1 HOUR 20 MINUTES = 120, 4 HOURS 45 MINUTES = 445 6 HOURS 5 MINUTES = 605, 20 MINUTES = 020.

	_____ hrs.	_____ min.
Don't know/Not Sure		777
Refused		999

25. Over the past year have you been boating in a boat less than 16 feet long? These boats include small motor boats, canoes, kayaks, and rafts.

ASK Q.26 ←-----	Yes	1
	No	2
SKIP TO Q.27←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

26. Did you wear a life jacket the last time you were in a boat that was less than 16 feet long?

Yes	1
No	2
Don't know/Can't Recall	3 (7)
Refused	4 (9)

27. Next a few questions about your usual source of primary care for general health care problems or checkups. Do you have a usual source of primary health care?

ASK Q.28 ←-----	Yes	1
	No	2
SKIP TO Q.29 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

28. Where do you usually for primary health care? IF HOSPITAL, PROBE FOR "EMERGENCY ROOM OR CLINIC." IF CLINIC CODE AS "5"

Community health center or migrant clinic	1
Health maintenance Organization (Kaiser or Group Health)	2
Hospital emergency room	3
Local (county) health department	4
Private practitioner (doctor, nurse, physician assistant, clinic or hospital clinic)	5
Military source (VA, military doctor or hospital)	6
Other (Specify:)	7
Don't know/Not sure	8 (7)
Refused	9

29. The next few questions are about efforts to lose weight. Are you now trying to lose weight?

	Yes	1
SKIP TO Q.32 ←-----	No	2
	Refused	3 (9)

30. Are you eating fewer calories to lose weight?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

31. Have you increased your physical activity to lose weight?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

32. Now I would like to ask you a few questions about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life? NOTE: 100 CIGARETTES = 5 PACKS

CONTINUE ←-----	Yes	1
	No	2
SKIP TO Q.38 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

33. About how long old were you when you first stated smoking fairly regularly? SHOW IN YEARS.

(YEARS:) _____	
Don't know/Not Sure	77
Refused	99

34. Do you smoke cigarettes now?

ASK Q.35. ←-----	Yes	1
SKIP TO Q.37 ←-----	No	2
SKIP TO Q.38 ←-----	Refused	3 (9)

35. On the average, about how many cigarettes a day do you now smoke? RECORD # OF CIGARETTES BELOW.

NOTE: 1 PACK = 20 CIGARETTES

(# OF CIGARETTES:) _____	
Don't smoke regularly	88
Refused	99

36. During the past 12 months, have you quit smoking for one day or longer?

Yes	1
No	2
Refused	3 (9)

SKIP TO Q.38

37. About how long has it been since you last smoked cigarettes regularly? Was it ... READ 1-6.

Less than one month	1
One month to less than 3 months	2
Three months to less than 6 months	3
Six months to less than one year	4
One year to less than 5 years	5
5 years or more	6

Don't know/Not sure	7
Never Smoked regularly	8
Refused	9

38. What about certain kinds of smokeless tobacco products. Have you ever used or tried any smokeless tobacco products such as chewing tobacco or snuff for six months or longer? PROBE FOR WHICH.

CONTINUE ←-----	Yes, chewing tobacco	1		
	Yes, snuff	2		
	Yes, both	3		
SKIP TO Q.44 ←-----	No, neither	4		
	Don't know/Not sure	5	5	(7)
	Refused	6	(9)	

39. Do you currently use any smokeless tobacco products such as chewing tobacco or snuff? PROBE FOR WHICH

CONTINUE ←-----	Yes, chewing tobacco	1		
	Yes, snuff	2		
	Yes, both	3		
SKIP TO Q.42←-----	No, neither	4		
	Don't know/Not sure	5	5	(7)
	Refused	6	(9)	

40. About how long have you been using smokeless tobacco products? ENTER MONTHS OR YEARS

Don't know/Not sure	_____	777
Refused		999

41. ENTER	Months	1
	Years	2
	Other (SPEFICY:)	3

SKIP TO Q.44

42. About how long did you use smokeless tobacco products? ENTER MONTHS OR YEARS

Don't know/Not sure	_____	777
Refused		999

43. ENTER	Months	1
	Years	2
	Other (SPEFICY:)	3

44. These next few questions are about the use of beer, wine, wine cooler, cocktails, and liquor, such as vodka, gin, rum, or whiskey -- all kinds of alcoholic beverages that people drink at meals, special occasions, or when just relaxing. Have you had any beer, wine, wine coolers, cocktails, or liquor, during the past last month, that is, since _____?
(DATE)

SKIP TO Q.50 ←-----	Yes	1
	No	2
	Refused	3 (9)

45. During the past month, how many days per week or per month did you drink any alcoholic beverages, on the average? EXAMPLE 2 DAYS/WEEK = 2W, 4 DAYS/MONTH = 4M

SKIP TO Q.48 ←-----	Don't know/Not Sure	777
	Refused	999

46.

Days per week	1
Days per month	2

47. A drink is one can or bottle of beer, one glass of wine, one can or bottle of wine cooler, one cocktail, or one shot of liquor. On the days when you drank, about how many drinks did you drink on the average?

	_____	_____	drinks
Don't know/Not Sure			77
Refused			99

48. Considering all types of alcoholic beverages, that is, beer, wine, wine coolers, cocktails, and liquor, as drinks, how many times during the past month did you have five or more drinks on an occasion?
RECORD BELOW.

	_____	_____	times
None			88
Don't know/Not Sure			77
Refused			99

49. And during the past month, how many times have you driven when you've have perhaps had too much too drink? RECORD BELOW.

	_____	_____	times
None			88
Don't know/Not Sure			77
Refused			99

50. Some people visit a doctor for a routine checkup, even though they are feeling well and have not been sick. About how long has it been since you last visited a doctor for a routine checkup; was it ...
READ 1- 4:

Within the past year	1
Within the past 2 years	2
Within the past 5 years	3
Or more than 5 years ago	4

Don't know/Not sure	7
Never	8
Refused	9

51. The next few questions are about your blood cholesterol, which is a fatty substance found in the blood. Have you ever had your blood checked cholesterol checked?

ASK Q.52 ←-----	Yes	1
	No	2
SKIP TO Q.56 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

52. About how long has it been since you last had your blood cholesterol checked; would you say it was ... READ 1-4:

Within the past year	1
Within the past 2 years	2
Within the past 5 years	3
Or more than 5 years ago	4

Don't know/Not sure	5 (7)
Refused	6 (9)

53. Have you ever been told your blood cholesterol level, in numbers?

ASK Q.54 ←-----	Yes	1
	No	2
SKIP TO Q.56 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

54. What is your blood cholesterol level? MUST BE THREE DIGIT NUMBER

Don't know/Not sure	777
Refused	999

55. Have you ever been told by a doctor or other health professional that your blood cholesterol is high?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

56. Next, I'd like to ask you about diabetes, some times called "sugar diabetes." Have you ever been told by a doctor that you have diabetes?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

57. Now I would like to ask you about injuries you may have as a result of accidents or violence. Have you suffered any injury which required medical treatment such as a visit to the doctor, clinic, to hospital in the past 12 months?

	Yes	1
	No	2
SKIP TO Q.60 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

58. If you have suffered several injuries, these next questions are about your most recent one. Where did you receive the treatment for this injury? Was it ... READ 1-3:

In a doctor's office, clinic or first aid station	1
In a hospital emergency room	2
Or as an admitted patient to a hospital	3

Other (Specify:)	4
Don't know/Not sure	5 (7)
Refused	6 (9)

59. Did you miss a day of work or restrict your normal activities for at least one day because of this most recent injury?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

60. These next questions are about health care plans which include health insurance, pre-paid plans such as HMO's (Health Maintenance Organizations), or government plans as Medicare. Do you have and kind of health care plan?

ASK Q.61 ←-----	Yes	1
	No	2
SKIP TO Q.65 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

61. What type of health care plan do you have?

Basic health plan (state program)	1
Champus/VA/Military	2
HMO insurance such as Group Health or Kaiser	3
Indian Health Service	4
Medicare	5
Medicaid	6
Private insurance such as Blue Cross/Blue Shield or through an employer or union	7
Other (SPECIFY)	8
Don't know/Not sure	9 (77)
Refused	A (99)

62. For hospital bills, does your health care plan cover all, most, some or none of your expenses?

63. For visits to a doctor's office when you are sick, does your health care plan cover all, most, some or none of your expenses?

64. When you are not sick, does your health care plan cover all, most, some or none of your checkups or other preventative services?

	<u>Q.62</u>	<u>Q.63</u>	<u>Q.64</u>
All	1	1	1
Most	2	2	2
Some	3	3	3
None	4	4	4
Don't know/Not sure	5 (7)	5 (7)	5 (7)
Refused	6 (9)	6 (9)	6 (9)

65. Was there a time during the last 12 months, when you needed to see a doctor but could not due to the cost?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

MEN TO SKIP TO SECTION (Q.78). ASK ALL WOMEN Q.66-77

FEMALES ONLY:

66. I would like to ask you a few questions about a medical exam called a mammogram. A mammogram is an x-ray of the breast and involves the pressing the breast between two plastic plates. Have you ever had a mammogram?

ASK Q.67, THEN SKIP TO Q.71 ←-----	Yes	1
ASK Q.67, THEN SKIP TO Q.72 ←-----	No	2
	Don't know/Not sure	3 (7)
	Refused	4 (9)

67. (ASK FOR THOSE CODE 1, YES, Q.60) Does your health insurance pay for mammograms? IF NEEDED, SAY: "Pay" means cover either all or part of the costs.

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

68. How long has it been since you had your last mammogram? READ ONLY IF NECESSARY.

CONTINUE ←-----	1 year ago or less	1
	More than a 1 year ago, but less or equal to 2 years ago	2
	More than 2 years ago, but less or equal to 3 years ago	3
	More than 3 years ago, but less or equal to 5 years ago	4
SKIP TO Q.70 ←-----	More than 5 years ago	5
	Don't know/Not sure	6 (7)
	Never	7 (8)
	Refused	8 (9)

69. In what month did you have this mammogram?

January	1	August	8
February	2	September	9
March	3	October	A
April	4	November	B
May	5	December	C
June	6	Don't know/Not sure	D (77)
July	7	Refused	E (99)

SKIP TO Q.72

70. What is the most important reason that you did not have a mammogram in the last year? DO NOT READ.

71. What is the important reason that you never had a mammogram? DO NOT READ. RECORD BELOW.

	Q.70	Q.72
Not recommended by doctor/Doctor never said it was needed	1	1
Not needed/Not necessary	2	2
Never heard of a mammogram	3	3
Cost	4	4
No insurance to pay for it	5	5
Other	6	6
Don't know/Not sure	7	7
Refused	8 (9)	8 (9)
	ASK Q.72	SKIP TO Q.73

72. Was your last mammogram done as part of a routine checkup, because of a breast problem other than cancer, or because you've all ready had breast cancer?

Routine checkup	1
Breast problem	2
Had breast cancer	3
Don't know/Not sure	4 7
Refused	5 9

73. These next questions are about clinical a breast exam. During this exam, the breast is felt for lumps by a doctor, nurse, or other medical professional. Have you ever had a clinical breast exam?

ASK Q.74 ←-----	Yes	1
	No	2
SKIP TO Q.76 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

74. How long has it been since you had your last breast exam? READ ONLY IF NECESSARY.

1 year ago or less	1
More than a 1 year ago, but less or equal to 2 years ago	2
More than 2 years ago, but less or equal to 3 years ago	3
More than 3 years ago, but less or equal to 5 years ago	4
More than 5 or more years ago	5
Don't know/Not sure	6 (7)
Never	7 (8)
Refused	8 (9)

75. Was your last breast exam done as part of a routine checkup, because of a breast problem other than cancer, or because you've already has a breast cancer?

Routine checkup	1
Breast problem	2
Had breast cancer	3
Don't know/Not sure	4 (7)
Refused	5 (9)

76. The next questions are about pap smears. A pap smear is a test where material is taken from the cervix, that is the mouth of the womb, to see if any cancer cells are present. Have you ever had a pap smear?

	Yes	1
	No	2
SKIP TO Q.79 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

77. How long has it been since you had your last pap smear? READ ONLY IF NECESSARY

1 year ago or less	1
More than a 1 year ago, but less or equal to 2 years ago	2
More than 2 years ago, but less or equal to 3 years ago	3
More than 3 years ago, but less or equal to 5 years ago	4
More than 5 years ago	5
Don't know/Not sure	6 (7)
Never	7 (8)
Refused	8 (9)

78. Was your last pap smear done as part of a routine exam, or to check a current or problem or for some other reason?

Routine checkup	1
Check problem	2
Other	3
Don't know/Not sure	4 (7)
Refused	5 (9)

79. Have you had a hysterectomy (that is an operation to remove the uterus/womb)?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

MALES AND FEMALES :

80. The next few questions are to determine your beliefs and opinions about the national health problem of AIDS. Have you ever heard the AIDS virus called by the name HIV?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

81. To your knowledge, are there drugs available that can lengthen the life of a person infected with the AIDS virus?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

82. Do you think a person who is infected with the AIDS virus can look and feel well and healthy?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

Do you think a person can get infected with AIDS or the AIDS virus from ... READ 83 - 84.

	<u>Yes</u>	<u>No</u>	<u>Don't know/ Not sure</u>	<u>Refused</u>
83. Donating blood	1	2	3 (7)	4 (9)
84. Being cared for by a nurse, doctor, dentist, or other health care worker who has the AIDS virus ?	1	2	3 (7)	4 (9)

85. Do you think a pregnant woman who has the AIDS virus can give it to her baby ?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

86. Do you have a child in the kindergarten through the eighth grade ?

ASK Q.87←-----	Yes	1
	No	2
SKIP TO Q.90←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

87. Would you allow your child (ren) to be in the same classroom with a child who infected with the AIDS virus ?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

88. At what grade level do you think a child should begin AIDS education in school? RECORD GRADE LEVEL: EXAMPLE; (8TH GRADE, = 08, SENIOR IN HIGH SCHOOL = 12.)

89. At what grade do you think your child should begin education about venereal disease or sexually transmitted disease?

	Q.88	Q.89
Kindergarten or less	55	55
Never	88	88
Don't know/Not sure	77	77
Refused	99	99

90. Would you eat in a restaurant where the cook is infected with the AIDS virus?

91. Would you be willing to work with a person who is infected with the AIDS virus?

	Q.90	Q.91
Yes	1	1
No	2	2
Don't know/Not sure	3 (7)	3 (7)
Refused	4 (9)	4 (9)

92. Where could you go to be tested for the AIDS virus infection? DO NOT READ.

	Private doctor, HMO	1
	Blood bank/Plasma center/Red cross	2
	Health department	3
	AIDS clinic/AIDS testing site	4
	Hospital, emergency room	5
	Family-planning clinic	6
	STD clinic (Sexually Transmitted Disease)	7
	Community health clinic/ Primary care clinic	8
	Company or industry clinic	9
	Military induction or examination	A
	Other (SPECIFY):	B
	No place	C (88)
SKIP TO Q.94 ←-----	Don't know/Not sure	D (77)
	Refused	E (99)

93. Where else could you go? DO NOT READ.

	Private doctor, HMO	1
	Blood bank/Plasma center/Red cross	2
	Health department	3
	AIDS clinic/AIDS testing site	4
	Hospital, emergency room	5
	Family-planning clinic	6
	STD clinic (Sexually Transmitted Disease)	7
	Community health clinic/ Primary care clinic	8
	Company or industry clinic	9
	Military induction or examination	A
	Other (SPECIFY):	B
	No place else	C (88)
	Don't know/Not sure	D (77)
	Refused	E (99)

94. Some people use condoms to keep from getting the AIDS virus through sexual activity. How effective do you think using a condom is in preventing getting AIDS virus through sexual activity ?
READ 1-3.

Very effective	1
Somewhat effective	2
Or not at all effective	3

Don't know how effective	4
Don't know method	5
Refused	6 (9)

95. Next I have a few questions about gun safety. Do you keep a loaded gun in your house?

ASK Q. 96 ←-----	Yes	1
	No	2
SKIP TO Q. 97 ←-----	Don't know/Not sure	3 (7)
	Refused	4 (9)

96. Is it a hand gun ?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

DEMOGRAPHICS

97. These next few questions ask for a little more information about yourself. How old were you on your last birthday? RECORD AGE IN YEARS.

	____ _ years
Don't know/Not sure	07
Refused	09

98. What is your race; would you say...READ 1-5:

White	1
Black	2
Asian, Pacific Islander	3
Aleutian, Eskimo, American Indian	4
Or some other (SPECIFY)	5
Don't know/Not sure	6 (7)
Refused	7 (9)

99. Are you of Hispanic origin, such as Mexican American, Latin American, Puerto Rican, or Cuban ?

Yes	1
No	2
Don't know/Not sure	3 (7)
Refused	4 (9)

100. What is the highest grade or year of school you completed? READ ONLY IF NESSARRY.

8 th grade or less	1
Some high school	2
High-school graduate or GED certificate	3
Some technical school	4
Technical-school graduate	5
Some college	6
College graduate	7
Post-graduate or professional degree	8

Refused	9

101. Are you currently ... READ 1-7:

Employed for wages	1
Self- Employed	2
Out of work for more than 1 year	3
Out of work for less than a 1 year	4
A homemaker	5
A student	6
Or Retired	7

Refused	8 (9)

102. And are you ... READ 1-6:

Married	1
Divorced	2
Widowed	3
Separated	4
Never married	5
Or a member of an unmarried couple	6

Refused	7 (9)

103. Which of the following categories best describes your annual household income from all sources...READ 1-8:

Less than \$10,000	1
\$10 - \$15,000	2
\$15 - \$20,00	3
\$20 - \$25,000	4
\$25- \$35,00	5
\$35 - \$50,000	6
Or over \$50,000	7 (8)

Don't know/Not sure	8 (7)
Refused	9 (9)

104. About how much do you weigh without shoes? RECORD BELOW. (EXAMPLE 120 POUNDS = 120, 98 POUNDS = 098)

_____ pounds
Don't know/Not Sure 777
Refused 999

105. About how tall are you without shoes? RECORD BELOW. (Example: 5'2" = 502, 5'11" = 511)

_____ ft _____ inches
Don't know/Not Sure 777
Refused 999

**ASK THIS QUESTION ONLY OF FEMALES BETWEEN 18 AND 45 YEARS OF AGE
ALL OTHERS AND YES IN Q.79, SKIP TO Q.108.**

106. To your knowledge, are you pregnant ?

ASK Q. 107 ←-----Yes 1
No 2
SKIP TO Q. 108 ←-----Don't know/Not sure 3 (7)
Refused 4 (9)

107. During what month is your baby due ?

January	1	August	8
February	2	September	9
March	3	October	A
April	4	November	B
May	5	December	C
June	6	Don't know/Not sure	D (77)
July	7	Refused	E (99)

108. Are there children under the age of eighteen living in your household?

ASK Q. 109/111 ←-----Yes 1
SKIP TO Q. 112 ←-----No 2
Don't know/Refused 3 (9)

109. How many are infants to age five? RECORD. (0 = NONE, 8 = EIGHT OR MORE, 9 = REFUSED)

Refused _____ 9

110. How many age six to twelve? RECORD. (0 = NONE, 8 = EIGHT OR MORE, 9 = REFUSED)

Refused _____ 9

111. How many age thirteen to seventeen? RECORD. (0 = NONE. 8 = EIGHT OR MORE, 9 = REFUSED)

Refused _____ 9

112. How many telephone numbers will reach this household, including the number I used today ?
RECORD BELOW.

NOTE: DIFFERNTIATE BETWEEN TELEPHONE NUMBERS AND TELEPHONE SETS, IF NECESSARY. INCLUDE ALL TELEPHONE NUMBERS THAT CAN REACH HOUSEHOLD.

Total Telephone Numbers: _____

113. In which county do you live?

Adams	01	Grays Harbor	14	Pierce	27
Asotin	02	Island	15	San Juan	28
Benton	03	Jefferson	16	Skagit	29
Chelan	04	King	17	Skamania	30
Clallam	05	Kitsap	18	Snohomish	31
Clark	06	Kittitas	19	Spokane	32
Columbia	07	Klickitat	20	Stevens	33
Cowlitz	08	Lewis	21	Thurston	34
Douglas	09	Lincoln	22	Wahkiakum	35
Ferry	10	Mason	23	Walla Walla	36
Franklin	11	Okanogan	24	Whatcom	37
Garfield	12	Pacific	25	Whitman	38
Grant	13	Pend Oreille	26	Yakima	39
				Don't know/REF	40

114. That's my last question. Let me emphasize that your answers cannot be identified with your name. Everyone's answers will be combined to give us information about the health practices of people in this state.

Thank you very much for you time and cooperation.